

PSYCHIATRIC CONSULTATION

DESCRIPTION

Psychiatric Consultation offers school and school mental health staff assistance through both case consultation and program consultation. Case consultation involves assessment and treatment of individual students, while program consultation offers guidance on mental health programmatic issues, such as helping schools develop policies and procedures to enhance school mental health or implementing systems of early identification and referral. Psychiatric Consultation can also be used to educate school staff on a range of mental health issues affecting students, including medication management.

RATIONALE

Psychiatric Consultation to schools can greatly facilitate the early identification, treatment, and referral of students with serious mental health issues, thereby reducing barriers to school mental health services. Additionally, psychiatric consultation can provide support and education to mental health and school staff in order to increase their effectiveness in working with students with mental health problems, including those in need of medication.

RECOMMENDATIONS

In order to provide effective Psychiatric Consultation to schools most successfully, the following recommendations are offered to schools, school mental health staff, and consulting psychiatrists:

School mental health programs should establish a working relationship with practicing psychiatrists in the community by:

1. Collaborating with a local mental health agency, hospital, or child/adolescent psychiatry fellowship training program.
2. Inviting local psychiatric/mental health agencies to school-wide mental health promotion activities.
3. Forming an interagency steering committee to oversee coordination and collaboration efforts between the school mental health program and the mental health agency.
4. Providing consultation in collaboration with community providers, school providers, educational diagnosticians, educators, and administrators by:
 - Defining and agreeing upon specific role and expectation of services provided by the psychiatrist including:
 - a) to whom the consultation is available (e.g., students, providers, school staff)
 - b) the nature of the consultation (e.g., meeting with the school mental health provider about particularly challenging students, diagnostic clarification and/or treatment planning, diagnostic and treatment services to students in collaboration with the school mental health provider's treatment plan)
 - c) mutually agreed upon procedures established for referring students to the psychiatrist (see [*Sample Procedure for Student Referral to a Psychiatrist*](#))
5. Considering "telepsychiatry consultation" (i.e. psychiatric consultation via video camera) where on-site psychiatric consultation is not possible.
 - Collaborating mental health and primary care providers can teleconference with the psychiatric consultant about care being provided to students.
 - Direct psychiatric service provision.

Consulting Psychiatrists need to possess the following skills in order to work in a school setting:

1. Experience evaluating and treating children and adolescents.
2. Understanding the diverse roles and unique challenges faced in the school-based setting, whether in school-based health centers, general school-based mental health service, or more traditional school consultation.
3. Understanding how to initiate, develop, and maintain consultative relationships with schools.
4. Knowledge of Special Education legalities [IDEA & Section 504], eligibilities, levels, Individualized Educational Plans (IEPs), services, resources, and diagnostic testing.
5. Ability to navigate education system effectively to optimize student mental health. Ideally, psychiatrists should be knowledgeable about school administration procedures, school personnel, and the socio-cultural environment of the school.
6. Ability to advise school personnel and parents about appropriate accommodations, special education, and related services and placements for students with psychiatric disorders.
7. Ability to conduct comprehensive assessments of students with an emphasis on understanding barriers to learning, and to participate in comprehensive treatment planning with clinical, school, home, and community components.
8. Knowledge and ability to follow [confidentiality](#) guidelines, HIPAA & FERPA, which govern legal exchange of information and records.
9. Knowledge of rules governing dispensing psychotropic medications within the schools.

Consulting Psychiatrists will benefit from having the following orientation when working in a school setting:

1. Appreciate the complexities of multidisciplinary school and community systems.
2. Consider the meaning of psychotropic medications to the youth, family, school, and community.
3. Appreciate emerging and alternative models and public health approaches.

REFERENCES

Adelson SL. (1999) Psychiatric public health opportunities in school-based health centers. Adolescent psychiatry: Development and clinical studies. *Annals of the American Society for Adolescent Psychiatry*; 24:75-89.

American Academy of Child & Adolescent Psychiatry (2005), Practice Parameter for Psychiatric Consultation to Schools. *J Am Acad Child Adolesc Psychiatry* 44:1068-1083. Retrieved from <http://www.aacap.org/galleries/practiceparameters/psychconsschools.pdf>

Rappaport, N. (2001). *Psychiatric Consultation to School-based Health Centers: Lessons Learned in an Emerging Field*. *Journal of the American Academy of Child and Adolescent Psychiatry*.

RESOURCES

Rappaport N (2001), Emerging models. *Child Adolesc Psychiatr Clin N Am* 10:13-24.

MHPET Dimension 5: SERVICE DELIVERY/ Indicator 21

Berlin IN (2001), A retrospective view of school mental health consultation. *Child Adolesc Psychiatr Clin N Am* 10:25-31.

Bostic JQ, Rauch P (1999), The 3 R's of school consultation. *J Am Acad Child Adolesc Psychiatry* 38:339-341.

Child Adolesc Psychiatr Clin N Am 10:1 (January, 2001). Entire Volume 10.

Rifkin, D (2005) Conference poster session: *A Curriculum for School-Based Child & Adolescent Psychiatry Trainees*, Center for School Mental Health (Univ of Maryland School of Medicine, Division of Child & Adolescent Psychiatry), 10th Annual Conference on Advancing School-Based Mental Health (Cleveland, OH; October 28, 2005).